PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/538950

CLAIMS AS FILED - PART I (Column 1) (Column 2)						Column 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
U.S	. NATIONAL :	STAGE FEES	(00:0111	,	Γ,	Column 2)	Г	RATE	FEE	1		T
-	SIC FEE		SMALL ENT. = \$ 150		LARC	SE ENT. = \$ 300	-			1	RATE	FEE
EXAMINATION FEE			Satisfies PCT A			her situations =	B	ASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			(4) = \$50 All other situation	/\$ 100	\$	100 / \$ 200 SA = \$ 50 / \$ 100	E	XAM. FEE			EXAM. FEE	200
SEARCH FEE			Search Rpt.) = \$ 250 / \$ 500		ALL o	other countries = 200 / \$ 400	s	EARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			minus 20 =		*			X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			Ø m	inus 3 =	*			X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PRE	ESENT					+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	900	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E	1
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	- [7	X \$ 100 ≃		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
							TO	OTAL ADDIT.		OR	TOTAL ADDIT.	
		(Column 1)		(Colun		(Column 3)				_		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	L	X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	>	K \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
			TC	OTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 02/2005)

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